

better maintenance of healing art standards, and that therefore Basic Science laws make for real conservation of the public health. In California, most of the component county societies, and also the great majority of members, have expressed their approval of a law as proposed; and the 1940 state election ballot should include a Basic Science law among the initiative measures which will then be submitted to the people for vote. It is our belief that it would receive a most favorable vote of the electorate.

C. M. A. SPECIAL ASSESSMENT

Action of the House of Delegates.—Rapidly changing times are apt to create new and imperative needs. For the first time since the reorganization of the California Medical Association in 1902, its House of Delegates, in annual session assembled, has deemed it necessary to levy a mid-year special assessment upon the members. From component county societies in different portions of the State, resolutions for such a purpose were presented by their respective delegations; and both purpose and scope of the contemplated "public health and welfare" work received earnest consideration before the reference committees and in the House.

The text of the resolutions adopted by the House of Delegates, and other informative material have been sent to every member of the Association, and in this issue of the OFFICIAL JOURNAL the minutes of our legislative bodies chronicle the action that was approved. Obedient to the direction of the supreme legislative body of the Association, the Council has issued instructions to carry through the mandate of the House.*

CONCERNING "INITIATIVE LAWS" ON THE CALIFORNIA MEDICAL HORIZON

Three Proposed Initiative Laws.—Whether they wish it or not, the next two years will place before the physicians of California proposed legislation, having to do with medical practice, which cannot be indifferently thrust aside. Every physician, then, who fails to meet his obligations merely places on the shoulders of his fellows an increased burden. This thought should be taken to heart by every medical licentiate in California.

What are these initiative problems?

1. The initiative for a revision of the Chiropractic Practice Act, which will be on the ballot of the special state election as early, perhaps, as next October.

2. The Compulsory Health Insurance Initiative. Such an initiative has been threatened by the proponents of a compulsory health insurance law, both before and since they failed to secure such legislation at Sacramento. If the special state election is not held until October, the advocates of a compulsory health insurance statute may be able to secure the necessary signatures for an initiative in time for placement on the ballot. Other-

wise, it will probably appear on the 1940 state ballot.

3. Basic Science Initiative. The California Medical Association House of Delegates has instructed the Council of the Association to arrange for the placement of such an initiative on the state election ballot. The regular election in 1940 will precede the next legislative session in 1941. A Basic Science law could well wait, therefore, until November, 1940, for submittal to the electorate.

The above measures have not only a momentous relation to scientific medicine, but an even more intimate connection with the economic phases of private practice. No M.D. licentiate in California, therefore, but has an important stake in the legislation noted above.

Component county societies are urged to give these matters their very earnest attention. Bluntly phrased, it may be stated that, for the time being, these measures transcend discussions of scientific topics, no matter how intriguing the latter may be.

CALIFORNIA PHYSICIANS' SERVICE

Gratifying Registration Under C. P. S.—The large registration of members of the State Association for California Physicians' Service is a widespread evidence of the earnest desire of doctors of medicine to make possible adequate medical care for all social groups of the State; and in keeping with its known policies, CALIFORNIA AND WESTERN MEDICINE has endeavored to promote this C. P. S. organization work by giving generous space to commendatory articles that have appeared in California newspapers, such press items usually reflecting, in many ways, the current thought of the more than six million human beings making up the population of the Golden State. To afford this extra space has naturally meant an increase in both the folios and the expense of their printing as part of the OFFICIAL JOURNAL. The issues at stake, however, are of such great importance that the additional costs seem negligible and justified.

The reports at the Del Monte annual session from officers of the California Physicians' Service and heard by the delegates representing the component county societies have no doubt, by this time, been transmitted by the delegates to their local colleagues, who will have learned that California Physicians' Service is moving forward as rapidly as the conventions of safety in procedure permit. Members may certainly rest assured that the officers of C. P. S. are alert to their grave responsibilities, and that full information will be sent to all physicians as soon as certain fundamental requirements are met.

C. M. A. WELCOMES A NEW COMPONENT UNIT

Inyo-Mono Counties Medical Society, the New Addition to the Fold.—Years have elapsed since a new county medical society has been welcomed into the fold of component units of the California Medical Association; this because the

* In this issue, see page 446, Item 11. For Official Notice, see page 426.

field for such extension work had practically been covered.

For some time, however, we have been hoping to see the counties of Inyo and Mono represented by a county medical society to better fulfill in their territory the needs of scientific and organized medicine; and this hope was realized when at Del Monte the Inyo-Mono Medical Society submitted its by-laws and made application for a charter, the petition being promptly and cordially granted by the House of Delegates. While recording this historical item, it may be observed that it is not without interest that these two counties, with little more than ten thousand population, are represented at Sacramento by their own state senator, while, in contrast, Los Angeles County, with almost three million in population, has in the California Senate of forty members, likewise only one representative. It may be added that the House of Delegates placed Inyo and Mono counties in the second or Los Angeles district, the roads from Los Angeles County being the best for travel.*

Good wishes are extended to this new unit which was formed through the foundation of a local medical society some months ago at a meeting sponsored by the State Association Secretary and Officers of the Los Angeles County Medical Association.

Other State Association and Component County Society News.—Additional news concerning the activities and work of the California Medical Association and its component county medical societies is printed in this issue, commencing on page 426.

* See Resolution No. 10, on page 438.

Council Issues Revised Statement on Sulfanilamide.—Another revision of the statement of the Council on Pharmacy and Chemistry of the American Medical Association regarding the actions, uses, and dosage of sulfanilamide is published in the February 25 issue of *The Journal of the Association*. The Council says that its first statement on the drug appeared in *The Journal*, July 31, 1937, and a revised statement on October 30, 1937.

"The enormous amount of work which has been done with the use of this product warrants a second revision of the article," the Council says.

The more recent clinical evidence indicates, states the Council, that its action has been extended so that sulfanilamide becomes a still more useful drug with promise of value in some rare conditions. In treatment, particularly of streptococcal infections, results have been most striking in most patients, while in others, for reasons not yet known, the drug has not proved especially efficacious.

The Council again points out that the drug is one which should be used only under conditions which require caution and careful observation, particularly in view of side reactions. Because of its toxicity, patients to whom the drug is to be given should have daily attention by a physician. Many patients have shown some degree of development of a slate-gray type of cyanosis, first apparent in the lips and nail beds but afterward diffusing over the entire body. The exact nature of this cyanosis is unknown, but in the opinion of most observers it is not as serious a complication as it was once thought.

As the Council previously has warned, sulfanilamide should preferably be given alone, and not with other drugs unless specifically indicated.

EDITORIAL COMMENT†

PREVENTION OF SERUM SICKNESS

If confirmed, the studies of "inverse anaphylaxis" in man, currently reported by Voss and Hundt¹ of the Children's Clinic, Heidelberg, Germany, may lead to successful methods for the prevention of serum sickness, and may conceivably necessitate revisions of current theories of protein sensitivity.

The Heidelberg pediatrician drew blood from patients convalescent from serum sickness following routine administration of antidiphtheritic horse serum. From 1 to 10 cubic centimeters of the resultant convalescent human serum were injected intravenously in other children at various periods after therapeutic administration of diphtheria antitoxin. No allergic symptoms were noted if the convalescent serum was injected within twenty-four hours after administration of the diphtheria antitoxin. If, however, the convalescent serum injection was delayed till the third or fourth day, an "inverse anaphylactic reaction" was noted. This was shown by a generalized erythema, which usually disappeared within a few hours. If the convalescent serum injection was delayed till the eighth day, *i. e.*, till the end of the usual incubation period of spontaneous serum sickness, the inverse anaphylactic reaction was of "shock-like intensity."

Following these induced allergic reactions, the patients were completely desensitized, and did not react to subsequent injection with even massive doses of antidiphtheritic horse serum. Moreover, spontaneous serum sickness did not develop in these desensitized children after completion of the usual incubation period. Their findings suggest that intravenous injection of convalescent serum-sickness serum, given about the third day, might be a feasible method of preventing serum sickness. Whether or not earlier (symptom-free) injections would be equally effective was not determined.

From the theoretical point of view their studies of "inverse Prausnitz-Küster reaction" are even more suggestive. This "inverse Prausnitz-Küster reaction" was performed by injecting 0.1 cubic centimeter of dilute diphtheria antitoxin (or normal horse serum) subcutaneously in normal children. From eight to twelve hours later these children were given an intravenous injection with 1 to 5 cubic centimeters human convalescent serum-sickness serum. Within thirty minutes, marked edema and erythema developed in and around the area injected with horse proteins. The unsuspected result, however, was their observation that this "inverse Prausnitz-Küster reaction" is not specific for horse proteins. Control skin areas injected eight to twelve hours previously with ox or sheep

† This department of CALIFORNIA AND WESTERN MEDICINE presents editorial comments by contributing members on items of medical progress, science and practice, and on topics from recent medical books or journals. An invitation is extended to all members of the California Medical Association to submit brief editorial discussions suitable for publication in this department. No presentation should be over five hundred words in length.

¹ Voss, A. E., and Hundt, O.: *Ztschr. f. Immunitätsforsch.*, 94:281 (Nov.), 1938.